Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 06/07/2007	Address: 26875, C.P. 5256.
Case #: 43 - 24988	COLUNBUS, IN. 477201
County: BAZTHOLOKIEN	
m	
Type of Laboratory Seizure (check one)	Seizure Location (check all that apply)
	Residence Hotel/Motel Outbuilding Open - No Structure Other:
Items Found: Location (bedroom, kitchen, open ai	r, etc)
(check all that apply) Lithium/Ammonia Reaction(s): Lal Late	IGERATOR AT TOP OF STAIRS.
Red Phosphorous/Indine Reaction(s):	
Flammable Solvente: \ /A D. O.S. L. OSAT	IONS INSIDE AND OUTSIDE HOME.
Water Reactive Metal (Lithium): In 1.0€	AND OUTSIDE OF HOME-VARIOUS LOCATIONS.
MAnhydrous Ammonia: LN INNK, OO	TSIDE MOME.
Mydrochloric Acid Gas Generator(s): Bue	J Prie- OUTSIDE LANCE.
CLOSS	Z 1's
Corrosive Base:	
Other (item and location):	· · · · · · · · · · · · · · · · · · ·
Child under age 18 discovered (check one) Yes 1 (number present) No *If yes, fax report to Child Protective Services	Investigative Information Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other:
This report is to be faxed to the following agencies that serve the location:	
Fire Department: ELIZABETHIONUL VED	Fax: 812 - 579 - 5403
Health Department: BARTHOLONIENS CO.	Fax: 812 - 379 - 1040
Child Protection Service: BART WOLDHEN CO.	Fax: 812 - 378 - 6370
For further information regarding this methamphe Investigating Officer: <u>KARTIJA, LLEAD</u>	tamine laboratory, contact Phone 812 - S22 - 1441

This form is to be included with the ease file, and a copy sent to the Claudestine Laboratory Team Leader for retention.

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.